

Work Order ID 93728

December 5, 2012 1:46:17 PM

93728

Page 1

Item ID: 647.9613

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: RH Aft Wiper Deflector

Stop

NS2

Start Date: 11/26/12 Start Qty: 10.00

10

Cust Item ID:

Required Date: 12/14/12 Req'd Qty: 10.00

10

Customer:

Reference:

Approvals: Process Plan: CL

Date: 12/12/05 Tooling:

Date:

Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Work Center ID	Operator	Description	Set Up/Hr	Run Hours	Accept Qty	Reject Qty	Reject Number	Stamp
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Draw Nbr	Revision Nbr	Memo	0.00	0.00	0.00	0.00		
647.9600	N/C	CUT AT 7.25" LONG						
100								
100								
Bandsaw								

12-12-12

9

PHO

110			0.00					
110								
Outsource5		Memo	0.00					
Outsource process - Machining		ISSUE P/O: 18599						
		POSSIBLE SUPPLIER: ARCHER PRECISION						

12-12-12

Certificate of conformity required

115	Receive & Inspect for Damage & Mat'l Certs	0.00						
115								
Packaging	Memo	0.00						
Packaging								

12-12-12

NCR: Yes No

WORK ORDER NON-CONFORMANCE / UPDATE

DOA *✓* Date: 13/07/10QA Closed: *✓* Date: 13/6/17

Work Order: <u>93720</u>	<i>Gel</i>	<i>PJW</i>	<i>ABD</i>	DISPOSITION		AGAINST DEPARTMENT/PROCESS					
Part No. <u>647-9613</u>	<i>130</i>	<i>130</i>	<input type="checkbox"/> Rework	<input checked="" type="checkbox"/> Scrap	<input type="checkbox"/> Use-as-is	<input type="checkbox"/> Skid-tube	<input type="checkbox"/> Crosstube	<input type="checkbox"/> Water Jet	<input type="checkbox"/> Engineering		
NCR No. <u>13-ZT33</u>			<input type="checkbox"/> Work Order Update	<input type="checkbox"/> Machining	<input type="checkbox"/> Small Fab	<input type="checkbox"/> Prod. Eng. Coor.	<input type="checkbox"/> Quality				
				<input type="checkbox"/> Thermoforming	<input type="checkbox"/> Finishing	<input type="checkbox"/> Rec/Store/Packaging	<input type="checkbox"/> Other	<input type="checkbox"/> Composite	<input type="checkbox"/> Supplier		
				<input type="checkbox"/> Large Fab							

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data				Qty x2 Parts Retrived to Dont from supplier with Defects.	(DAS 16 13/04/01)	#1 - has a cut out in Bottom surface of Part SCRAP		<i>✓</i>	(DAS 16 13/04/01)
Equip/Tooling					Q72042 13/04/01	#1 material "████████". "Falloff" found a crack After machining Scrap + DDM	<i>✓</i>	<i>✓</i>	Q72042 13/04/01
Operator						Inform Supplier			
Material						ATG or Archon?			
Setup									
Other									
Process									
Supplier	<i>✓</i> 13/04/01	<i>✓</i> 10	<i>✓</i> 12						
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General		
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld
<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Burrs	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Part Moved	
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Positioned Wrong	
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Power Loss/Surge	
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes		
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing		
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish		
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio		

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Page 2

Item ID: 647.9613

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: RH Aft Wiper Deflector

Stop

NS2

Start Date: 11/26/12 Start Qty: 10.00 *10*

Cust Item ID:

Required Date: 12/14/12 Req'd Qty: 10.00 *10*

Customer:

Reference:

Approvals: Process Plan: _____

Date: _____

Tooling: _____

Date: _____

Run Start

NR1

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Seq.	ID	Op.	Tool	Run Hrs	Accept	Reject	Reject	Inspe.
Work Center	ID	Description	Code	Qty	Qty	Number	Stamp	
117	*117*	QC6- Inspect dimensions to drawing	0.00	7				

117

117

QC

Quality Control

Memo

0.00

13.4.1

13.4.1

118

118

HandFinish

Hand Finishing

Memo

0.00

REMOVE ALL PART MARKINGS

7 16/13.4.2

120

120

Outsource4

Outsource process - Anodize

Memo

0.00

HARD ANODIZE IAW MIL-A-8625 TYPE 3
COLOUR BLACK

Q/O: 19493

CL 13/04/04 ⑦

NCR: Yes / No

DQA: Date:

WORK ORDER NON-COMPLIANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>				
Part No. _____											
NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
Bending	Bend	Grain	Ovalized	Pressure/Forced							
Centre Not Concentric to O/S	BOM/Route	Hardware	Over/Under tolerance	Temperature/Cure							
Cracks	Broken/Damaged	Inspection Incomplete	Part Incorrect	Weld							
Crushed/Crimped	Burrs	Instructions Incomplete/Unclear	Part Lost/Missing	Wrong Stock Pulled							
Cuffs	Contamination	Maintenance	Part Moved								
Heat Treat	Countersink	Mislabeled	Positioned Wrong								
Inspection Strip in Tube	Cut Too Short	Misread	Power Loss/Surge								
Ripples in Bend	Drill Holes	Offset									
Torque Waves in Extrusion	Drawing	Out of Calibration									
Turning Sequence	Finish	Out of Sequence									
Wave/Twist in Tube	Folio	Outside Dimensions									

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Page 3

Item ID: 647.9613

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: RH Aft Wiper Deflector

Stop

NS2

Start Date: 11/26/12 Start Qty: 10.00

10

Cust Item ID:

Required Date: 12/14/12 Req'd Qty: 10.00

10

Customer:

Reference:

Approvals: Process Plan:

Date: _____

Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____

Date: _____

SPC (Y/N): _____ Date: _____

Stop

NR2Sequence ID/
Work Center IDOperation
Description

130

130

Packaging

Packaging

Receive & Inspect for Damage & Mat'l Certs

Set Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

0.00

0.00

IDENTIFY AS PER APICAL MPP-120 BY STAMPING P# AND REV

DAS
21
B
BSIB

7

140

140

QC

Quality Control

QC5- Inspect part completeness to step on W/O

0.00

0.00

0.00

150

150

SprayPaint

Spray Painting

Spray Painting per QSI005 4.2

0.00

0.00

0.00

Memo

PRIME AS PER DWG NOTE #2

125452

7 0 0 13-6-1

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS													
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/>	Quality <input type="checkbox"/>	Other <input type="checkbox"/>
Part No. _____			Work Order Update <input type="checkbox"/>																
NCR No. _____																			
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance			Initial Chief Eng	Action Description			Sign & Date		Verification		QC Inspector				
Doc/Data																			
Equip/Tooling																			
Operator																			
Material																			
Setup																			
Other																			
Process																			
Supplier																			
Training																			
Unapproved																			
FAULT CATEGORY																			
Landing Gear				General															
				Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>					Pressure/Forced <input type="checkbox"/>							
				Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>					Temperature/Cure <input type="checkbox"/>							
				Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>					Weld <input type="checkbox"/>							
				Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>					Wrong Stock Pulled <input type="checkbox"/>							
				Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>												
				Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>												
				Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>												
				Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>	<input type="checkbox"/>												
				Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>	<input type="checkbox"/>												
				Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>	<input type="checkbox"/>												
				Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>	<input type="checkbox"/>												

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Page 4

Item ID: 647.9613

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: RH Aft Wiper Deflector

Stop

NS2

Start Date: 11/26/12 **Start Qty:** 10.00 ***10***

Cust Item ID:

Required Date: 12/14/12 **Req'd Qty:** 10.00 ***10***

Customer:

Reference:

Approvals: **Process Plan:**

Date:

Tooling:

Date:

Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

**Sequence #/
Work Center ID**

**Operation
Description**

**Set Up/
Run Hours**

Tool No.

**Tool
Man**

Code

**Accept
Qty**

**Reject
Qty**

**Reject
Number**

**Insp.
Stamp**

160

QC14- Inspect Spray Paint

0.00

160

QC

Memo

5/3/06/06

(X7)

Quality Control

170

Identify as per dwg & Stock Location: 57437

0.00

170

Packaging

Memo

0.00

7x 13-06-6

SP

190

QC21- Final Inspection - Work Order Release

0.00

190

QC

Memo

0.00

MJ 13-06-12

Quality Control

CD 13/06/11

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: Date:

QA Closed: Date:

Work Order: _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS					
				Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other			
Part No. _____											
NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
Bending	Bend	Grain	Ovalized	Pressure/Forced							
Centre Not Concentric to O/S	BOM/Route	Hardware	Over/Under tolerance	Temperature/Cure							
Cracks	Broken/Damaged	Inspection Incomplete	Part Incorrect	Weld							
Crushed/Crimped.	Burrs	Instructions Incomplete/Unclear	Part Lost/Missing	Wrong Stock Pulled							
Cuffs	Contamination	Maintenance	Part Moved								
Heat Treat	Countersink	Mislabeled	Positioned Wrong								
Inspection Strip in Tube	Cut Too Short	Misread	Power Loss/Surge								
Ripples in Bend	Drill Holes	Offset									
Torque Waves in Extrusion	Drawing	Out of Calibration									
Turning Sequence	Finish	Out of Sequence									
Wave/Twist in Tube	Folio	Outside Dimensions									

Picklist Print

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Page 1

Work Order ID: 93728

Parent Item: 647.9613

Parent Item Name: RH Aft Wiper Deflector

Start Date: 11/26/12

Required Date: 12/14/12

Start Qty: 10.00

Required Qty: 10.00

Comments: IPP REV:A NEW ISSUE 12-11-19 JLM VERIFIED BY:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
647.9613P RH Aft Wiper Deflector		Purchased	No				Each	0.0000		10		E13/3/20(9) 4/3/17/17	
M7075T6B6.000X6.000 7075-T6 BAR 6.000' X 6.000"		Purchased	No				f	0.0000		1.2851064			

M124030

LJ 12-12-19
S. b

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____		DISPOSITION			AGAINST DEPARTMENT/PROCESS																		
Part No. _____		Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>														
NCR No. _____		Work Order Update <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>														
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector												
Doc/Data																							
Equip/Tooling																							
Operator																							
Material																							
Setup																							
Other																							
Process																							
Supplier																							
Training																							
Unapproved																							
FAULT CATEGORY																							
Landing Gear				General																			
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio								<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled		<input type="checkbox"/> Other	

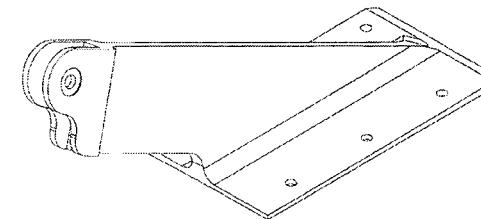
1 2 3 4 5 6 7 8

THE INFORMATION CONTAINED HEREIN IS UNCLASSIFIED
DATE 06-29-10 BY P.BRAYO

REF	EX-REF	DATE
	LAST MODIFIED BLACK F. PDS	06-29-10
4000	NC AND REFS	06-29-10

NOTES:

- 1 MATERIAL: ALUMINUM 7075-T651 PER AMS-QQ-A-250/12.
- A 2 FINISH: ANODIZE PER MIL STD-A-8625, TYPE III, CLASS 2, COLOR BLACK; PRETREAT PRC-DESO TO PR-148 ADHESION PROMOTER; PRIME IAW MIL-P-23377J TYPE I CLASS N.
- 3 PART DIMENSIONS CONTROLLED BY CAD MODEL
FILE NAME: 647.9610 NC LH FWD WIPER DEFLECTOR.SLDprt, LAST MODIFIED 06/30/10.
- 4 PART DIMENSIONS CONTROLLED BY CAD MODEL
FILE NAME: 647.9611 NC LH AFT WIPER DEFLECTOR.SLDprt, LAST MODIFIED 06/30/10.
- 5 PART DIMENSIONS CONTROLLED BY CAD MODEL
FILE NAME: 647.9612 NC RH FWD WIPER DEFLECTOR.SLDprt, LAST MODIFIED 06/30/10.
- 6 PART DIMENSIONS CONTROLLED BY CAD MODEL
FILE NAME: 647.9613 NC RH AFT WIPER DEFLECTOR.SLDprt, LAST MODIFIED 06/30/10.
- 7. DEBURR AND BREAK ALL SHARP EDGES.
- 8. IDENTIFY IAW MPP-120. LASER ETCH P/N REVISION, 12 PT. CENTURY GOTHIC.



647.9610 SHOWN
647.9612 OPPOSITE

SPEC

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UNCO

SUBJ

WIT

VIS

93728 MLJ

12-11-27

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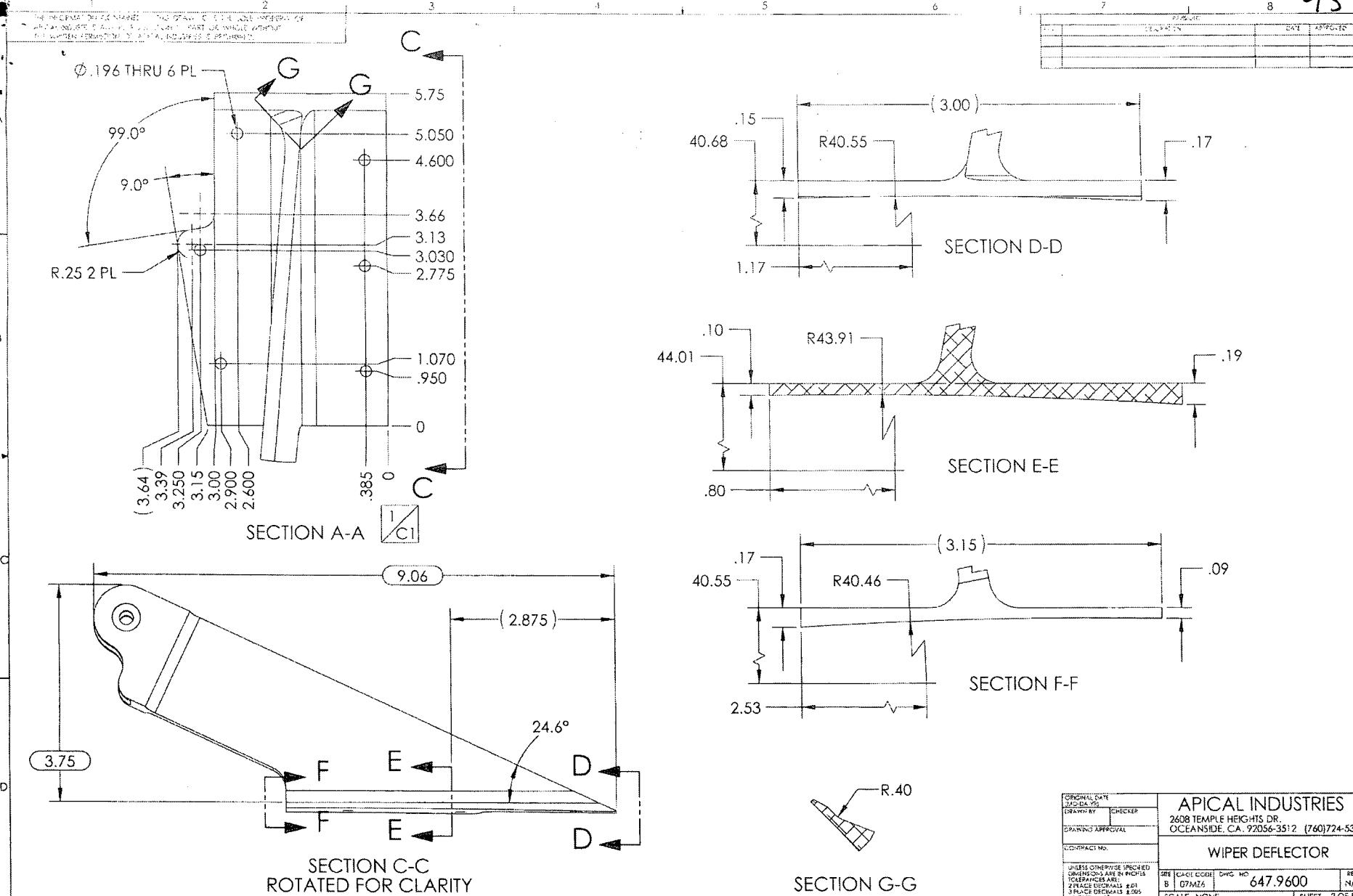
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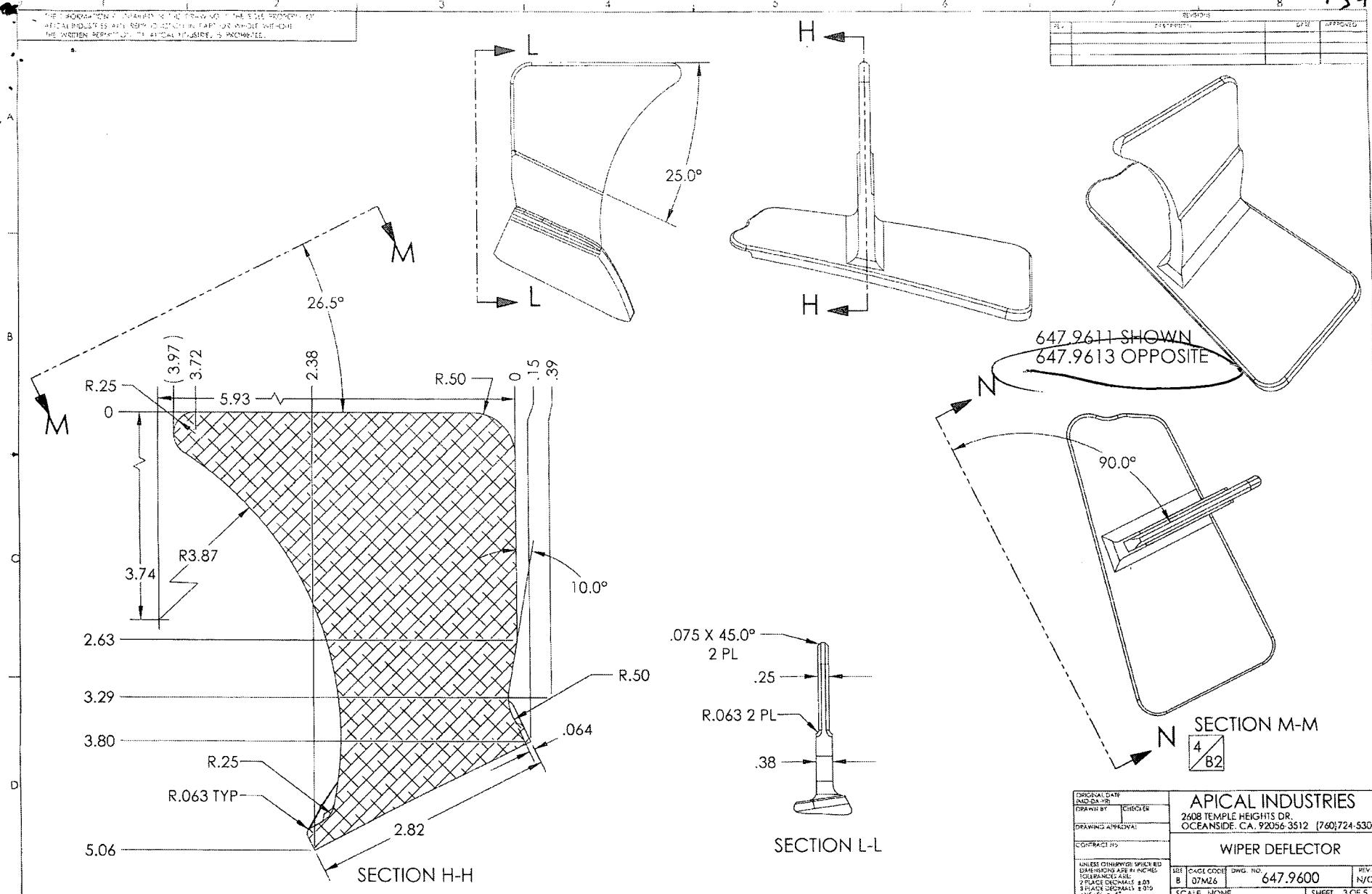
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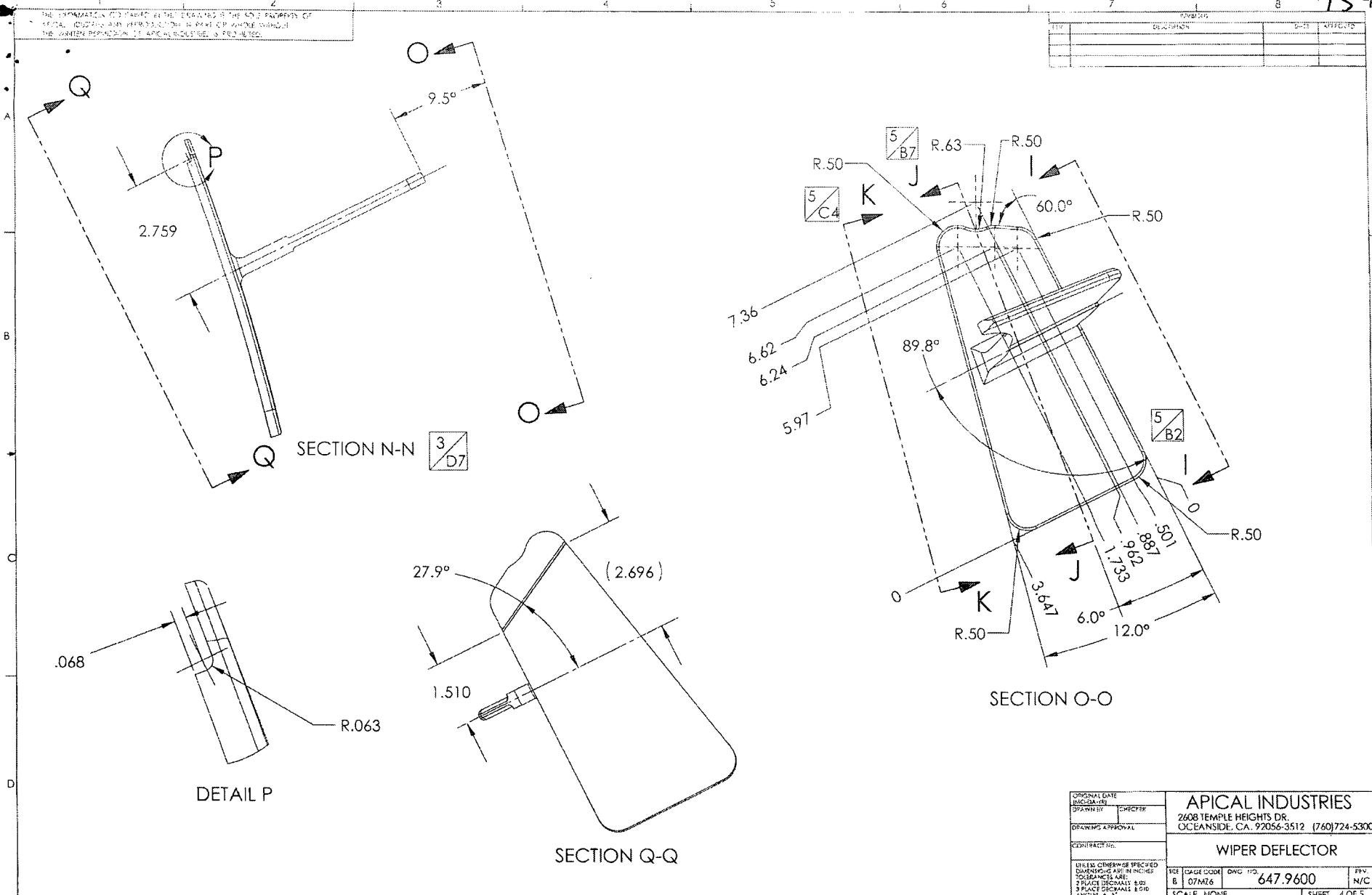
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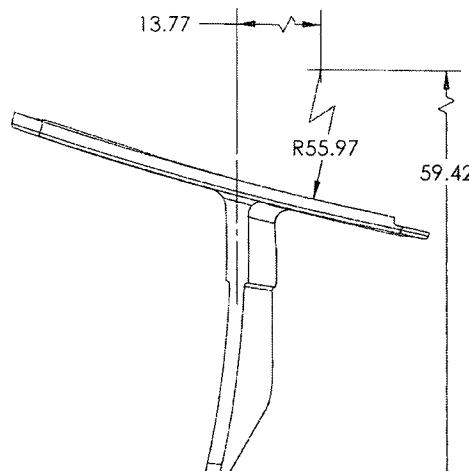
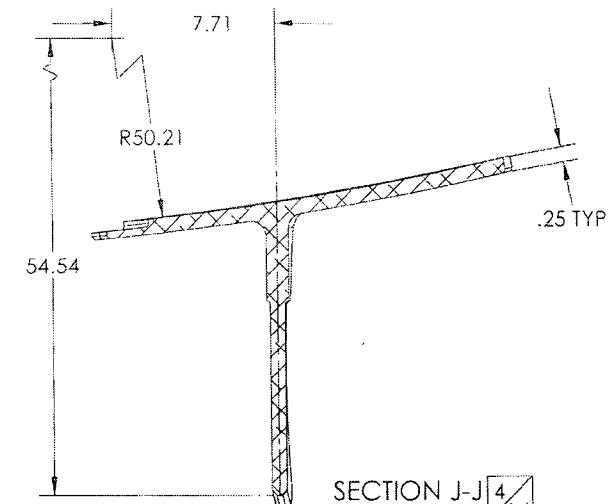
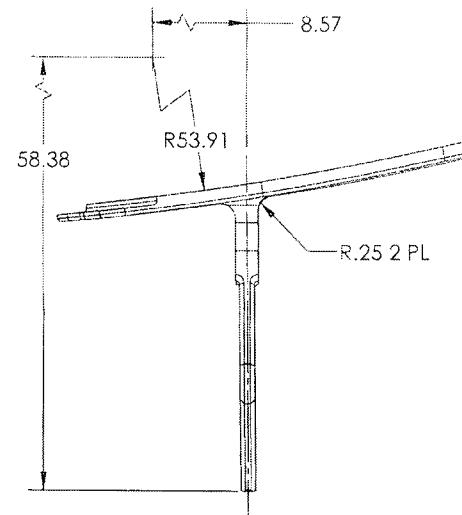
93728



ORIGINAL DATE (MO-YR)	APICAL INDUSTRIES	
DRAWN BY	CHEFER	2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA 92056-3512 (760)724-5300
DRAWING APPROVAL		
CONTRACT NO.		
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES 2 PLACE DECIMALS ± .03 3 PLACE DECIMALS ± .010 ANGLES ± 5°		
REV	DATE CODE	DOC. NO.
B	07M26	647.9600
SCALE: NONE		P/P: N/C
SHEET 4 OF 5		

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93728



ORIGINAL DATE 10-04-10	REV. 04-25-10	APICAL INDUSTRIES	
DRAWN BY J. JACKSON	CHECKED P. BRAVO	2608 TEMPLE HEIGHTS DR OCEANSIDE, CA. 92056 3512 (760)724-5300	
DESIGN APPROVAL P. BRAVO 04-22-10	CONTRACT NO.	WIPER DEFLECTOR	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES 1 PLACE DECIMALS 2 PLACE DECIMALS ± 0.1 3 PLACE DECIMALS ± 0.05 4 PLACE ± 0.01		SET CAGE CODE	DWG. NO.
		B 07M26	647.9600
		SCALE	NONE
		REV.	N/C
		1 SHEET 5 OF 5	





2228 Gladwin Cres.
Ottawa, Ont.
K1B 4S6

Telephone (613) 899-2405
Fax (613) 226-1719

Certificate of Compliance

To:
Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury Ont.
K6A 1K7

Po Number	Part Number	Quantities
18599	647.9613	9

It is hereby certified that all articles mentioned above are in conformance with the requirements, specification and drawings as listed on customer purchase order number, 18599 issued by Dart Aerospace Inc.

Andrew Malcolm
Inspector
Archer Precision Inc.
2228 Gladwin Cres.
Ottawa, Ontario
K1B 4S6

Inspection Report

Customer Name

Dart Aerospace

QTY

DWG #
647.9600REV.
N/CPart Name
WIPER DEFLECTORDate
16/JAN/13

Lot#

Job #
674-4

Page 1 of _____				Inspection Interval		Special Notes											
Item #	DWG. Dim	Tolerance	Operator	QA First		QA Final		2	3	4	5	6	7	8	9	10	
				First Off	A	R	A										
Rev	N/C			/			/										
MAT	ALUM			/			/										
SUB	-																
Deburr	YES			/	/		/										
1	25°	±1/2°	25°	/		/		.00	.00	.00	.00	.00	.00	.00	.00	.00	
2	R.50	±.03	.50	/		/		.50	.50	.50	.50	.50	.50	.50	.50	.50	
3	2.38	±.03	.00	/		/											
4	5.93	±.03	.00	/		/											
5	3.97	±.03	3.972	/		/		3.973	3.974	3.974	3.975	3.974	3.974	3.974	3.974	3.974	
6	R.25	±.03	.25	/		/		.25	.25	.25	.25	.25	.25	.25	.25	.25	
7	R3.87	±.03	.00	/		/											
8	2.63	±.03	.00	/		/											
9	3.29	±.03	.00	/		/											
10	3.80	±.03	.00	/		/											
11	R.25	±.03	.25	/		/		.00	.00	.00	.00	.00	.00	.00	.00	.00	
12	R.063	±.01	.063	/		/		.00	.00	.00	.00	.00	.00	.00	.00	.00	
13	5.06	±.03	.00	/		/											
14	2.82	±.03	.00	/		/											
15	.064	±.01	.00	/		/											
16	R.50	±.03	.5	/		/											
17	10°	±1/2°	10	/		/											
18	.075X45°	±.01	.076	/		/		✓	✓	✓	✓	✓	✓	✓	✓	✓	
19	.25	±.03	.25	/		/		.248	.249	.249	.248	.248	.248	.248	.248	.248	
20	R.063	±.01	.063	/		/		✓	✓	✓	✓	✓	✓	✓	✓	✓	
21	.38	±.03	.38	/		/		.379	.380	.379	.379	.379	.379	.379	.379	.380	
22	.068	±.01	.068	/		/		✓	✓	✓	✓	✓	✓	✓	✓	✓	



2228 Gladwin Crescent
Ottawa, Ontario
K1B 4S6

Phone # 613-899-2405

Packing Slip

Date	Invoice #
3/26/2013	452

Ship To
Main Finished Goods Location Dart Aerospace 1270 Aberdeen Street Hawksbury, Ontario K6A 1K7

P.O. No.	Ship	Via	FOB	Project
18599	3/26/2013	FedEx		

Qty	Item Code	Description
9	Sales	647.9613 HST (ON) on sales



A.T.G. Industries Inc.
731, rue Industrielle Rd.
PLATING DEPARTMENT
Rockland, On K4K 1T2
Canada
Ph: (613) 446-4544
Fax: (613) 446-4556

Pack List

Number: 62347

Date: 30-Apr-13

To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ship To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms	Ship Via	
Quantity	Description	Rev:
1 lot	Part: ASST 12 PCS D2055 BLACK ANODIZE MIL-A-8625 TYPE II CLASS 2 12 PCS 645.3012 8 PCS 646.9710 7 PCS 647.1610 2 PCS 647.9312 10 PCS 647.9610 9 PCS 647.9612 7 PCS 647.9613 8 PCS 647.9313 HARD ANODIZE BLACK MIL-A-8625 TYPE III CLASS 2 Job: 20130248	PO: 19493 Line:
Certificate of Conformance		
A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order.		
ISO 9001 : 2008 REGISTERED ATG SALES-2010 TERMS APPLY		
DATE: <u>30 Apr 13</u>		
CERTIFIED SIGNATURE: <u>J. M. G.</u>		
RECEIVER SIGNATURE: <u>Johnne Wilson</u>		